

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITYINSTALLATION'S EPA
I.D. NO.I. NAME OF IN-
STALLATIONII. INSTALLA-
TION
MAILING
ADDRESSIII. LOCATION OF INSTAL-
LATION

2162226 - R8 SDMS

RECEIVED
MAY 07 1985
WASTE
MANAGEMENT DIVISION
FOR OFFICIAL USE ONLY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If not, information or through it and in the appropriate complete and below blank. If label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

C54234
GR1-3

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COMMENTS

INSTALLATION'S EPA I.D. NUMBER
F C 0 0 9 8 0 9 5 4 2 3 4
APPROVED
A
DATE RECEIVED
(yr., mo., & day)
8 5 0 5 0 7

I. NAME OF INSTALLATION

F R A N K E L M A N U F A C T U R I N G C O M P A N Y

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 5 1 2 5 R A C E C O U R T

CITY OR TOWN

4 D E N V E R

ST.

ZIP CODE

C O 8 0 2 1

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 S A M E

CITY OR TOWN

6

ST.

ZIP CODE

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

2 E P S T E I N , G . D A V I D V I C E P R E S I D E N T

PHONE NO. (area code & no.)

3 0 3 - 2 9 7 - 9 9 0 0

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 F R A N K E L M A N U F A C T U R I N G C O M P A N Y

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)F - FEDERAL
M - NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☐ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your Installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☒ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

C 0 0 0 7 0 5 7 9 5 3

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

I.D. - FOR OFFICIAL USE ONLY									
W									
1	2	3	4	5	6	7	8	9	10

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 5	2	3	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 K 0 8 6	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U 1 1 2	32 U 1 5 9	33 U 2 2 0	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

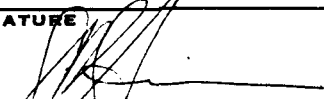
☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) G. David Epstein Vice President	DATE SIGNED 5/6/85
--	---	-----------------------

COPY MADE FOR
COMPLIANCE

S. E. DENVER OFFICE
SUITE 1250
7887 EAST BELLEVIEW AVENUE
ENGLEWOOD, COLORADO 80111
TELEPHONE (303) 741-1226

ASPEN OFFICE
600 EAST MAIN STREET
ASPEN, COLORADO 81611
TELEPHONE (303) 925-3476
TELECOPIER (303) 925-9367

WYOMING OFFICE
SUITE 500
2020 CAREY AVENUE
CHEYENNE, WYOMING 82001
TELEPHONE (307) 632-2160
TELECOPIER (307) 778-8175

PAUL D. PHILLIPS
(303) 295-8131

HOLLAND & HART

ATTORNEYS AT LAW

SUITE 2900
555 SEVENTEENTH STREET
DENVER, COLORADO

MAILING ADDRESS
P. O. BOX 8749
DENVER, COLORADO 80201
TELEPHONE (303) 295-8000
TELECOPIER (303) 295-8261
TWX 910-931-0568
CABLE HOLHART

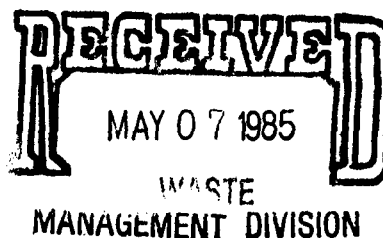
WASHINGTON, D. C. OFFICE
SUITE 1200
1875 EYE STREET, N.W.
WASHINGTON, D. C. 20006
TELEPHONE (202) 466-7340
TELECOPIER (202) 466-7354

MONTANA OFFICE
SUITE 1400
175 NORTH 27TH STREET
BILLINGS, MONTANA 59101
TELEPHONE (406) 252-2166
TELECOPIER (406) 252-1669

IDAHO OFFICE
SUITE 1400
IDAHO FIRST PLAZA
BOISE, IDAHO 83701
TELEPHONE (208) 343-3876
TELECOPIER (208) 343-8669

May 7, 1985

Ms. Joan Sowinski
Colorado Department of Health
Waste Management Division
4210 East 11th Avenue
Denver, Colorado 80220



Dear Ms. Sowinski:

As you may know, our client Frankel Manufacturing Company was recently visited and advised by representatives of the federal and state government that a number of barrels located on Frankel's property apparently contain hazardous materials. Frankel wishes to cooperate fully with the responsible government agencies and to properly dispose of these materials as promptly as possible. Frankel has already contacted a number of authorized hazardous waste treatment, storage and disposal facilities, and plans to enter into a contractual arrangement for disposal of these materials within the month. In order to do so, Frankel will need a hazardous waste generator identification number. Accordingly, Frankel hereby submits its Notification of Hazardous Waste Activity for your review.

Because Frankel desires to remedy any problems of concern to either your department or the U.S. Environmental Protection Agency as quickly as possible, we request that your office expedite processing of this Notification to the greatest extent possible so that final arrangements to properly dispose of the wastes of concern may be made. If your department has questions or concerns regarding the submitted notification, we would very much appreciate it if you could contact either Michael Brennan of this office or myself by telephone so that we may assist you in promptly resolving them. If Frankel, in the course of arranging for disposal, learns of any additional matters pertinent to this Notification, we will promptly notify both your department and Region VIII of the U.S. Environmental Protection Agency.

HOLLAND & HART

Ms. Joan Sowinski
May 7, 1985
Page 2

Thank you in advance for your assistance in this matter.
If I may be of any further assistance to you, please do not
hesitate to call upon me.

Sincerely yours,


Paul D. Phillips
of Holland & Hart

Enclosures

cc: ✓ Jon Minkoff
U.S. Environmental Protection Agency
Region VIII

James K. Bredar, Esq.
Assistant U.S. Attorney

Mr. G. David Epstein
Frankel Manufacturing Company

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

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COMMENTS

C 980954234

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr., mo., & day)

F C0D021657953

T/A C

1

850425

C54234
GR1-3

I. NAME OF INSTALLATION

FRANKEL MANUFACTURING COMPANY

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

35125 RACE COURT

Denver
031

CITY OR TOWN

4 DENVER

ST.

ZIP CODE

C080216

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

55125 RACE COURT

CITY OR TOWN

6 DENVER

ST.

ZIP CODE

C080216

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL
M = NON-FEDERAL

M

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